INFORMATION DISCLOSURE CITATION

(Use several sheets if necessary)

Docket Number (Optional) Application Number 17291 10/7
Applicant(s)

December 1, 2003

Tsutomu Okada

Filing Date

Group Art Unit

3734

10/724,812

	U.S.	PATENT	DOCUMENTS
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INITIAL	REF	DOCUMENT NUMBER	DATE	NAME	CLASS	SUBCLASS	FILING DATE IF APPROPRIATE
			U.S. PATENT	APPLICATION PUBLICATIONS			
EXAMINER INITIAL	REF	DOCUMENT NUMBER	DATE	NAME	CLASS	SUBCLASS	FILING DATE IF APPROPRIATE

FOREIGN PATENT DOCUMENTS

	REF	DOCUMENT NUMBER	DATE	COUNTRY	CLASS	SUBCLASS	Translation	
KEF		DOCEMENT NUMBER	DATE	COUNTRI	CLASS	SUBCLASS	YES	NO
		9-140306	6/3/1997	Japan				
		8-47360	2/20/1996	Japan				

OTHER DOCUMENTS

(Including Author, Title, Date, Pertinent Pages, Etc.)

EXAMINER	 DATE CONSIDERED

EXAMINER: Initial if citation considered, whether or not citation is in conformance with MPEP Section 609; Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

TRANSMITTAL OF INFORMATION DISCLOSURE STATEMENT Docket No. (Under 37 CFR 1.97(d)) 17291 In Re Application Of: Tsutomu Okada Application No. Filing Date Examiner Customer No. Group Art Unit Confirmation No. 10/724,812 December 1, 2003 Diane D. Vabut 23389 3734 5537 Title: MUCOSA EXCISION DEVICE USING ENDOSCOPE Address to Commissioner for Patents The Information Disclosure Statement submitted herewith is being filed after the period specified in 37 CFR 1.97(c), and on or before payment of the issue fee, and is accompanied by the Statement as specified in 37 CFR 1.97(e) and the fee set forth in 37 CFR 1.17(p). A check in the amount of is attached The Director is hereby authorized to charge and credit Deposit Account No. 191013 as described below. Charge the amount of \$180.00 Credit any overpayment. Charge any additional fee required. Payment by credit card. Form PTO-2038 is attached. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. Certificate of Transmission by Facsimile* Certificate of Mailing by First Class Mail I hereby certify that this correspondence is being deposited I certify that this document and authorization to charge deposit with the United States Postal Service with sufficient postage account is being facsimile transmitted to the United States Patent and Trademark Office as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450 Alexandria, VA (Fax no. 22313-1450" [37 CFR 1.8(a)] on (Date) (Date) Signature Signature of Person Mailing Correspondence Typed or Printed Name of Person Signing Certificate Typed or Printed Name of Person Mailing Certificate *This certificate may only be used if paying by deposit account. /Thomas Spinelli/ Dated: June 26, 2009 Signature

Thomas Spinelli

Registration No.: 39,533